

902 KAR 4:100. Maternal and child health services.

RELATES TO: KRS 194.050

STATUTORY AUTHORITY: KRS 194.030, 200.460, 200.470, 200.490, 211.900, 213.410, 214.155, 214.160, 241.185

NECESSITY, FUNCTION, AND CONFORMITY: The Cabinet for Human Resources, Department for Health Services is responsible for administering the programs of services in accordance with Title V of the Social Security Act (maternal and child health block grant). KRS 194.050 empowers the secretary to promulgate such administrative regulations as are necessary to implement programs that qualify for the receipt of federal funds. This administrative regulation sets forth the eligibility requirements for receipt of services under certain maternal and child health programs and describes the minimum types of services under each of those programs.

Section 1. Financial Eligibility Requirements. Financial eligibility for the maternal and child health prenatal program, well child program, and regional pediatrics program shall be based on 185 percent of the current Poverty Income Guidelines, published annually in the Federal Register by the Department of Health and Human Services. Persons meeting additional eligibility requirements and whose family income is at or below 185 percent of the federal poverty level are eligible for the services of the programs.

Section 2. Description of Services and Additional Eligibility Criteria. (1) Prenatal services. Minimum services to be provided or arranged in accordance with the standards developed for the prenatal program are:

- (a) Outreach;
- (b) Pregnancy testing/confirmation;
- (c) Contact visit counseling;
- (d) Initial examination;
- (e) Subsequent monitoring visits;
- (f) Laboratory tests, as necessary;
- (g) Individual counseling;
- (h) Prenatal classes;
- (i) Delivery;
- (j) Initial infant assessment;
- (k) Hospitalization;
- (l) Postpartum visit;
- (m) Family planning visit;
- (n) Arrange for follow-up for prenatal program infants; and
- (o) Home visits.

(2) Well child services. Minimum services to be provided in accordance with the standards developed for the well child program are:

- (a) Health and developmental history;
- (b) Unclothed physical examination;
- (c) Developmental assessment
- (d) Vision and hearing testing;
- (e) Nutritional assessment;
- (f) Laboratory testing;
- (g) Anticipatory guidance and health education;
- (h) Referral for acute, chronic, or handicapping conditions, with preauthorized payment for physician services, pharmacy or laboratory tests for acute conditions identified during the preventive

health assessment; and

(i) Nursing follow-up of referrals.

Services are to be appropriate for age and health history. Services may be provided to children not eligible for medical assistance aged birth through six (6) years of age, infants up to one (1) year of age of women enrolled in the prenatal program, children from seven (7) to twenty-one (21) years of age enrolled in the regional pediatric clinic program.

(3) Regional pediatrics services. Minimum services to be provided in accordance with the standards developed for the regional pediatrics program are:

(a) Diagnostic evaluation and management clinics by a pediatrician;

(b) Preventive health care;

(c) Referrals for specialty medical consultation or special procedures;

(d) Medications;

(e) Appliances; and

(f) Follow-up nursing care.

To be eligible for the regional pediatric program, the child shall be in the age range of birth to twenty-one (21) years, and have a chronic condition or suspected chronic illness or disability not covered by other state or community agencies. Preventive health care, specialty consultation, special procedures, medications and appliances shall be available with preauthorization only to children who receive ongoing medical management through regional pediatric clinics. (16 Ky.R. 722; eff. 11-29-89.)